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PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

09/964947

PATENT APPLICATION FEE DETERMINATION SHEET Substitute for Form PTO-875		
CLAIMS AS FILED - PART I (Column 1) (Column 2)		
FOR	NUMBER FILED	NUMBER EXTRA
USC FEE		
TOTAL CLAIMS P. 16(c)	minus 20 =	

SMALL ENTITY	
RATE	FEE
	\$ _____
	= _____
	= _____

OTHER THAN - SMALL ENTITY	
RATE	FEE
	\$ _____
	= _____
X \$ _____ =	

* If the difference in column 1 is less than zero, enter 0 in column 2.

CLAIMS AS AMENDED - PART II

AMENDMENT

1/82/105

(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.19(c))	Minus ** 29	=
Independent (37 CFR 1.19(b))	Minus *** 4	=

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

SMALL ENTITY

RATE	ADDITIONAL FEE
X \$ =	
X \$ =	
+ \$ =	
TOTAL ADD'L FEE	

OR

OR

OR

OR

SMALL ENTITY

RATE	ADDITIONAL FEE
X \$ =	
X \$ =	
+ \$ =	
TOTAL ADD'L FEE	

AMENDMENT	(Column 1)		(Column 2)		(Column 3)	
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
	Total (37 CFR 1.16(c))		Minus **		=	
	Independent (37 CFR 1.16(b))		Minus ***		=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

AMENDMENT	(Column 1)		(Column 2)		(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
Total (37 CFR 1.16(s))		Minus **		=	
Independent (37 CFR 1.16(b))		Minus ***		=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
 • If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1:
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.
 The information is required to obtain or retain a benefit by the public which
 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which
 37 CFR 1.14. This collection is estimated to take 1

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
 ** If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.
 This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
 For more information on this form, call 1-800-PTO-9199 and select option 2.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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